## REPORT OF BIRTH ABROAD CHECKLIST

NAME OF CH	IILD:
Date/Place of b	pirth:
	the following original documents with a photocopy. Include translations for any of the iments that are not in English. Neither photocopies nor translations need to be notarized
DOCUMENTS	S:
	Extract from Maternity Hospital Registry on Birth
	Translation of Extract from Maternity Hospital Registry on Birth
	Child's Birth Certificate
	Translation of Child's Birth Certificate
	American Parent's Passport
	Non-American Parent's Internal Passport
	Translation of Non-American Parent's Internal Passport
	Non-American Parent's External Passport (if applicable)
	Parents' Marriage Certificate
	Translation of Parents' Marriage Certificate
	Parents' Divorce Decrees (if applicable)
	Translation of Parents' Divorce Decrees (if applicable)
	Evidence of American Parent's Physical Presence in U.S. (registration in U.S. public or
private schools	s, deeds, military records, tax forms)
ACTIONS:	
	Presentation of Child
NOTES:	

Updated April 2009 Forms/Birth